

Docket No.
POU920000194US1

Declaration and Power of Attorney For Patent Application

English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled
METHOD AND SYSTEM FOR ISOLATING AND SIMULATING DROPPED PACKETS IN A COMPUTER NETWORK

the specification of which

(check one)

☒ is attached hereto.

☐ was filed on _____ as United States Application No. or PCT International Application Number _____ and was amended on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) or Section 365(b) of any foreign application(s) for patent or inventor's certificate, or Section 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)			Priority Not Claimed
_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)	<input type="checkbox"/>
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I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional

(Application Serial No.)

(Filing Date)

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. *(list name and registration number)*

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 Christopher A. Hughes, Reg. No. 26,914
 John E. Hoel, Reg. No. 26,279
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 Joseph C. Redmond, Jr., Reg. No. 18,753

Send Correspondence to: **Philmore H. Colburn II**
Cantor Colburn LLP
55 Griffin Road South
Bloomfield, CT 06002

Direct Telephone Calls to: *(name and telephone number)*
Philmore H. Colburn II (860) 286-2929

Full name of sole or first inventor Anthony Grech	
Sole or first inventor's signature <i>Anthony Grech</i>	Date 11/9/01
Residence 121 Sargent Avenue, Beacon, NY 12508	
Citizenship USA	
Post Office Address same as residence	

Full name of second inventor, if any Luke M. Hopkins	
Second inventor's signature	Date
Residence 21 Wayne Drive, Poughkeepsie, NY 12601	
Citizenship USA	
Post Office Address same as residence	

Full name of third inventor, if any Theodore R. Macurer	
Third inventor's signature	Date
Residence 13157 Bayfield Drive, Austin, TX 78727	
Citizenship USA	
Post Office Address same as residence	

Full name of fourth inventor, if any	
Fourth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Full name of fifth inventor, if any	
Fifth inventor's signature	Date
Residence	
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Full name of sixth inventor, if any	
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Third inventor's signature <i>Theodore R. Macurer</i>	Date 11/12/01
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Full name of fourth inventor, if any	
Fourth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Full name of fifth inventor, if any	
Fifth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Full name of sixth inventor, if any	
Sixth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	